



THE COMMONWEALTH OF MASSACHUSETTS

Division of Insurance

One South Station

Boston, Massachusetts 02110-2208

APPLICATION FOR REGISTRATION OF VIATICAL SETTLEMENT OR VIATICAL LOAN REPRESENTATIVE – CORPORATIONS, PARTNERSHIPS, & LIMITED LIABILITY COMPANIES

INSTRUCTIONS -- In order for us to process your application you must:

- Answer every question accurately and completely. Incomplete applications will be returned.
- Submit one of these applications for each Officer, Director, Partner, Designated Employee or Member with authority to conduct business for the Corporation or Partnership.
- Sign and date the application.
- Return this application with a check for \$75.00 to the Division of Insurance per each licensed Officer, Director, Partner, Members or Designated Employees. **Note: Fees are Non-Refundable.**

Corporations must also include:

- A certified copy of the Articles of Organization.
- A Certificate of Existence from the Secretary of State for a corporation.
- Signed minutes of meeting authorizing the Officers and/or Directors of the Corporation to solicit business on behalf of the Corporation.

Partnerships must also include:

- A Certificate of Existence from Municipality in which they do business.

LLC's must also include:

- A Certified copy of the Certificate of Organization.
- A Certificate of Existence from the Secretary of State.
- Signed minutes of meeting authorizing members of the LLC to conduct business on behalf of the LLC.

Non-Resident Corporate Brokers must also provide:

- Provide a certificate of good standing, not more than 90 days old, from your home state.
- A written designation of an agent for service of process or written irrevocable consent that any action against the applicant may be commenced against the applicant by service of process on the Commissioner.

If you have any questions or need assistance, please contact Licensing at (617) 521-7794.

The application form with your check should be mailed to:

Division of Insurance

Producer Licensing Section

One South Station

Boston, Massachusetts 02110 - 2208

Any false statement in this application is punishable as perjury under Ch. 268 Mass. General Laws and may result in the revocation of your license(s)

Please Print or Type

To the Commissioner of Insurance:

Fed ID # _____

Application is hereby made for registration of a Corporate Viatical Settlement or Viatical Loan Representative:

Insert exact name of the Corporation, Partnership, or LLC as it will appear on the registration. You may only conduct business in the name shown above:

Specify only Officers, Directors, Partners, Designated Employees or Members with authority to represent the appointing viatical settlement or loan provider or viatical settlement or loan broker. List their names and all of the titles of office held by each person. Complete one of these applications for each person named above.

- | | | | | | |
|----|--------------------|--------|-------|--------|-----------------------------------|
| 1. | Full Legal Name: | _____ | _____ | _____ | _____ |
| | | Last | First | Middle | Jr./Sr. |
| 2. | Social Security #: | _____ | _____ | 3. | Date of Birth: ____ / ____ / ____ |
| 4. | Home Address: | _____ | _____ | 5. | Tel # (____) _____ |
| | | Street | City | State | Zip |

6. Business Address: _____ 7. Tel # () _____
Street City State Zip

8. Residence (last 5 years) _____
Street City State Zip

9. Occupation (last 5 years):
From / / to / / Duties or Title: _____
Employer's Name: _____
Address: _____
Street City State Zip
From / / to / / Duties or Title: _____
Employer's Name: _____
Address: _____
Street City State Zip

10. Has any insurance commissioner or department ever suspended, cancelled, or revoked any license issued to you as an agent, broker, or motor vehicle damage appraiser, or ever refused to issue or renew any such license, or have you ever surrendered any such license or has any insurance company cancelled any contract of employment or an appointment of, or a license to you as its agent for any reason, or has any other public official or court ever suspended, cancelled or revoked any license or authority of any kind issued to you to pursue any trade, calling, or profession or refused to issue or renew any such license or authority or discharged or removed you from any public office or position? Do you engage in any business other than Viatical Settlements

☐ Yes ☐ No (If YES, attach details)

11. Have you ever been convicted of, or arrested or prosecuted for, any crime or offense against the laws of this or any other state or country, or plead nolo contendere to any indictment or complaint for such crime or offense, or is there pending against you any indictment, complaint, or proceeding for a violation of such laws? Brokers' License applying for:

☐ Yes ☐ No (If YES, attach details)

12. Have you ever changed your name through marriage or a court of law?

☐ Yes ☐ No (If YES, attach details, court, date of change, maiden name)

13. If the applicant is to conduct business under any name or title other than his real name, a certificate must be filed with the City or Town Clerk as required by Section 5 of Chapter 110 of the General Laws; however, prior to filing same, approval should be obtained from this Department. A copy of such certificate certified by the City or Town Clerk must be filed with this Department (Applies to Partnership ONLY).

14. Please describe your education or training or other qualifications regarding the field of viatical settlement or loan contracts and the laws of the Commonwealth of Massachusetts pertaining to viatical settlement or loan contracts (attach additional pages as needed).

15. I have read and I am familiar with the laws of Massachusetts respecting viatical settlement agreements and the duties and obligations of viatical settlement and loan representatives. I intend to act and hold myself out and carry on business in good faith as a viatical settlement or loan representative. I hereby verify the foregoing answers and statements and declare that they were made under the penalties of perjury. At any time, if any of the above information changes, I will notify your office.

Dated at _____ this _____ day of _____, _____ YEAR

full signature

, Applicant

print name

Please Note: This application must be signed by the applicant personally.

The undersigned hereby states that an investigation has been completed as to the character and ability of the applicant named herein and is satisfied that the applicant is of good moral character, financially responsible, trustworthy, and is qualified to act as a viatical settlement or loan representative.

SIGNATURE OF AUTHORIZED DESIGNEE OF VIATICAL SETTLEMENT OR
LOAN PROVIDER OR VIATICAL SETTLEMENT OR LOAN BROKER

NAME

TITLE

This application must be completed, signed, and include a check endorsed by the sponsoring viatical settlement or loan provider or viatical settlement or loan broker or the processing of your license will not be approved.